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FACSIMILE COVER SHEETDATE: **September 7, 2005**TO: **Commissioner for Patents**
Art Unit: 3663COMPANY OR FIRM: **USPTO**FACSIMILE NO.: **(571) 273-8300**FROM: **William E. Schmidt**FILE REF: **Serial No.: 10/600,478**
Filed: June 20, 2003
Atty Docket No.: 014-28331-USRECEIVED
OIPE/IAP

SEP 08 2005

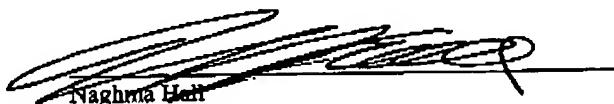
NUMBER OF PAGES INCLUDING THIS COVER SHEET: **13**

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- 1) Response to Office Action of June 8, 2005
- 2) Claim Amendment Transmittal

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper, along with any papers referred to as being attached or enclosed, is being transmitted via facsimile, to the Commissioner for Patents, facsimile number (571) 273-8300 on this 7th day of September, 2005.


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Naghma Hall

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:	§	
Aronstam	§	Docket No: 014-28331-US
Serial No: 10/600,478	§	Art Unit: 3663
Filed: June 20, 2003	§	Examiner: Mark Hellner
Title: Fiber Optic Amplifier For Oilfield Applications	§	Confirmation No.: 7107

AMENDMENT TRANSMITTAL

1. Transmitted herewith is a Response to Non-Final Office Action of June 8, 2005.
2. Applicant is other than a small entity.
3. The claims have been amended as follows:

CLAIMS

	Claims Remaining After Amendment		Previously Paid For		Number Extra		Rate		Additional Fees
Total Claims	25	-	26	=	0	x	\$50	=	\$0
Independent Claims	5	-	4	=	0	x	\$200	=	\$200
Multiple Dependent Claims (if any)									\$0
Total Fees									\$200.00

4. The Commissioner is authorized to charge the total fees for additional claims to Deposit Account No. **02-0429 (014-28331-US)**. The Commissioner is also authorized to charge any underpayment or credit any overpayment to Deposit Account No. **02-0429 (014-28331-US)**.

Respectfully submitted,

Date: September 7, 2005

William E. Schmidt

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RESPONSE TO NON-FINAL OFFICE ACTION OF June 8, 2005

This paper is a response to the Non-Final Office Action of June 8, 2005. No new matter has been added by amendment. Reconsideration of the application as amended below is respectfully requested.

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